

CAL/ACEP Emergency Medicine Research Education Foundation (EMREF)

Please read and follow the instructions carefully.

Before submitting your application, please be sure that the following items have been addressed:

- Title page is included as the first page of the application packet.
 - Table of Contents is included as the second page of the application packet and is adhered to strictly.
 - Evidence of IRB/AUC approval, or at least evidence of submission to IRB/AUC, from each institution, is included in application packet (for multi-centered studies, approval from or evidence of submission to IRB/AUC for all sites is required).
 - Research hypothesis is clearly stated.
 - Letter of support from Preceptor is included in application packet. (if appropriate)
 - All other grant support for the proposed project is listed in application packet.
 - Submission in electronic format is required. PDF/Microsoft Word is the preferred format.
- Submit one application to the following e-mail address:

CAL/ACEP EMREF GRANT APPLICATION

GENERAL INFORMATION

2008-2009

E-mail applications to: (Lucia room, lromo@calacep.org)

INTRODUCTION

The Emergency Medicine Research Education Foundation awards funds to support the development of research in emergency medicine. **The goals of the CAL/ACEP EMREF research grant are: 1) to promote research within the specialty of emergency medicine, 2) to advance emergency medical care, and 3) to facilitate the academic growth and development of future researchers in emergency medicine and thereby invest in the future of the specialty of emergency medicine.**

A maximum of \$5,000 will be awarded for each approved grant application. Funds are not to be used for capital equipment purchases, academic salary support, publication costs, or institutional overhead.

DEFINITION OF TARGETED EMERGENCY MEDICINE RESEARCH

Emergency medicine research is broadly defined as scientific investigation designed to furnish new knowledge relating to emergency medical care. For this grant, such investigations can be basic science or clinical research, providing the knowledge generated will contribute to improvements in emergency medicine practice or delivery of care.

QUALIFICATIONS AND RESPONSIBILITIES OF THE INVESTIGATORS

EMREF CAL/ACEP research grants are available to:

- Any EM physician/ EM nurses or other EM professionals
- Any EM resident in good standing. The resident must have a faculty preceptor who is capable of ensuring the successful completion of the proposed project.

Projects that include collaboration from nurses, community health professionals, physician assistants, or medical students are given priority.

Resident applicants are required to submit a **letter of support from a preceptor** at the applicant's institution. This letter must describe the preceptor's and the resident's roles and responsibilities in the proposed project. The preceptor must hold a MD, DO, PhD or equivalent degree. The preceptor may be in any department within the applicant's institution.

INSTITUTIONAL SUPPORT

The applicant assumes responsibility for conducting the research projects and supervising the work of the resident and associate investigators. The applicant and preceptor must demonstrate that access to a suitable caseload or patient population will be available for study during the funding period if a clinical research project is proposed. If a basic science or nonclinical project is proposed, the applicant must show that adequate and appropriately equipped laboratory space will be available during the funding period.

Research involving animals or human subjects must be approved by the institutional review board (IRB), or its equivalent, and a copy of the approval or pending approval sent with this application. IRB approval must be documented prior to dispensation of EMREF funds.

EVALUATION OF APPLICATIONS

Each application will be reviewed by emergency medicine specialists who are involved/informed in basic and clinical emergency medicine research. Each application will be judged by: 1) quality and significance of proposed research, 2) level of participation of all collaborators, 3) possible impact of research on community health. The reviewers will include an evaluation on the likelihood of completion of the project. The final funding decision will be made by (2 months after submittal), and all decisions are final. **(The research committee will make recommendations to board following scholarly review of applications and then EMREF Board, by simple majority, will make the final decision –)**

TERMS OF THE GRANT

- If research ceases prematurely grant funding will be stopped and all remaining funds returned.
- Research must be conducted in the US.
- The applicant/preceptor's institution is associated and/or organized for humanitarian purposes and is not a profit making organization.
- *Payment schedule will be specified with awarding of grant as will progress reports.*
- The CAL/ACEP EMREF assumes no legal or financial liability if patient care responsibilities of any kind are undertaken by the resident, preceptor, or associated investigators.
- The EMREF is not fiscally responsible for funds necessary for the project's completion. Funds are not to be used for capital equipment purchases (i.e. equipment costing more than \$500 and with a life of over one year), faculty salary support, or institutional overhead.

SUPPORT FACILITIES

The Investigator must submit letters of support if the proposed project uses facilities not routinely available to or directly under their supervision.

PUBLICATIONS

All discoveries resulting from work supported in part by the Emergency Medicine Research Education Foundation should be made available to the public and scientific community through approved scientific channels such as national meetings and peer reviewed publications. Publications will acknowledge the support of the EMREF and the appropriate corporate underwriter, if any.

PROGRESS REPORTS AND MONEY MANAGEMENT

The investigator and resident are required to submit a six month and a final progress report. Failure to provide reports will delay further funding.

CAL/ACEP EMREF RESEARCH GRANT APPLICATION INSTRUCTIONS

Do **not** submit an incomplete application. **An application will be considered incomplete if it is illegible, if it fails to follow instructions, or if the material presented is insufficient to permit an adequate review.** Unless specifically required by these instructions (e.g. human subjects certification, vertebrate animals verification) do **not** send supplementary material.

The application is to be submitted using the enclosed forms. Number the pages consecutively at the bottom throughout the application. Do not use suffixes such as 5a, 5b. Type the name of the investigator at the top of each printed page.

AN APPLICATION WILL NOT BE CONSIDERED IF PAGE LIMITATIONS ARE NOT OBSERVED.

The application consists of the following sections:

1. TITLE PAGE

2. ABSTRACT (must fit within abstract box)

Brief summary of research proposal. Include rationale, research hypothesis, specific aims, and significance.

3. CHECKLIST PAGE

4. RESEARCH PROJECT (limit 6 pages)

Please use the following subheadings

- a. *Research hypothesis.*
- b. *Specific Aims.*
- c. *Significance.* Detail how successful completion of this research project will impact emergency medicine and/or has the potential to develop into a long term research career.
- d. *Progress Report/Preliminary Studies.* Previous work done on the same or related problems by the applicant, preceptor or co-investigators. List any literature cited in the Appendix. *Do not include* published material by others not involved in the proposal.
- e. *Experimental Design and Methods.* Include sample size calculations, and data analysis and statistical methods as applicable.

Outline the major goals and objectives indicate how they will be achieved. Indicate how the preceptor will monitor progress.

5. ROLE OF PARTICIPANTS (limit 1 page)

List the investigator and each associate investigator and consultant. Include a brief description of how and to what extent each will be involved in the proposed project.

6. BIOGRAPHICAL SKETCHES

Brief description of investigator credentials. Include all investigators (1 paragraph each).

7. RESOURCES AND ENVIRONMENT

Describe the research facilities (laboratory space, clinical population, etc.) available for the project. If computer access or statistical support is available, it should be described in this section. Collaborating organizations or institutions should also be listed here.

8. BUDGET

Indicate how the money will be spent. Justify all major expenditures.

9. OTHER SUPPORT

List all current and pending intramural and extramural research funding for the applicant, preceptor and co-investigators. For each item indicate the grant identification number, grant type, PI, funding source, annual direct costs, funding period, percent effort, grant title, and brief description of project.

For all items indicate whether there is any scientific or budgetary overlap with the current proposal.

10. ETHICS

Human subjects - For all research involving human subjects, a part of the peer review process will include careful consideration of protections from research risks, as well as the appropriate inclusion of women, minorities, and children. The applicant should include specific measures on how protected health information (as defined by the Human Health Services) will be handled in accordance with the Privacy Rule of the Health Insurance Portability Accountability Act (HIPAA).” As per IRB requirements, please include:

1. Risks to the subjects
2. Adequacy of protection against risks
3. Potential benefits of the proposed research to the subjects and others
4. Importance of the knowledge to be gained
5. Data and safety monitoring plan (if applicable)

11. APPENDIX

Include letters of support from the preceptor (if required). Include references related to the project from at least five accepted and published resources. Do not use appendix to circumvent page limitations for research plans. Do not include experimental methods, protocols or figures that should be incorporated within the research project description.

TITLE PAGE
CAL/ACEP Emergency Medicine Research Education Foundation

	Applicant's Name	Degree	Title
A)			
	Preceptor's Name (If Required, See the List on the Following Page)	Degree	Title
B)			
	Applicant's Address	Phone #	Fax #
C)	_____		

	E-Mail Address:		
	Preceptor's Address	Phone #	Fax #
D)	_____		

	E-Mail Address:		
E)	Title of Research Project		
	Is This Research Project (check only one) <input type="checkbox"/> Basic Science <input type="checkbox"/> Clinical Science <input type="checkbox"/> Other (describe)		
F)	Is this a revision of a previously submitted application? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, what grant category (e.g. Career Development, Resident Research) project title and date?		
G)	Amount Requested \$ _____		
H)	Name and Address of Institution Receiving Funds		

I)	Name and address where checks should be sent (e.g. Grants Office).		

J)	Associate Investigator, Title, Address and Phone		
x)	_____		
	Applicant's signature and date		
x)	_____		
	Preceptor's signature and date		
x)	_____		

ABSTRACT

Give a brief summary of research proposal. Include rationale, research hypothesis, specific aims, and significance. Must fit within abstract box (4½ x 7½).

A large, empty rectangular box with a thin black border, intended for the user to write their abstract. The box is centered on the page and occupies most of the lower half of the document.

Applicant/Investigator (*Last, first, middle*): _____

CAL/ACEP EMERGENCY MEDICINE RESEARCH EDUCATION FOUNDATION

TABLE OF CONTENTS

Page Numbers

_____	Title Page
_____	Abstract
_____	Table of Contents
_____	Research Program
_____	Role of Participants
_____	Biographical Sketch
_____	Resources (NOT IF NECESSARY ?)
_____	Detailed Budget for Initial Budget Period
_____	Other Support
_____	Statement of conditions
_____	Appendix

RESOURCES

FACILITIES: Specify the facilities to be used for the conduct of the proposed research. Indicate the performance sites and describe capacities, pertinent capabilities, relative proximity, and extent of availability to the project. Under "Other," identify support services such as machine shop, electronics shop, and specify the extent to which they will be available to the project. Use continuation pages if necessary.

Laboratory:	
Clinical:	
Computer:	
Office:	
Other:	

MAJOR EQUIPMENT: List the most important equipment items already available for this project, noting the location and pertinent capabilities of each.

Principal Investigator/Program Director <i>(Last, first, middle):</i>								
DETAILED BUDGET FOR INITIAL BUDGET PERIOD DIRECT COSTS ONLY					FROM		THROUGH	
PERSONNEL <i>(Applicant organization only)</i>			%		DOLLAR AMOUNT REQUESTED <i>(omit cents)</i>			
NAME	ROLE ON PROJECT	TYPE APPT. (months)	EFFORT ON PROJ.	INST. BASE SALARY	SALARY REQUESTED	FRINGE BENEFITS	TOTAL	
	Principal Investigator							
SUBTOTALS →								
CONSULTANT COSTS								
EQUIPMENT (Itemize)								
SUPPLIES (Itemize by category)								
TRAVEL								
PATIENT CARE COSTS		INPATIENT						
		OUTPATIENT						
ALTERATIONS AND RENOVATIONS <i>(Itemize by category)</i>								
OTHER EXPENSES <i>(Itemize by category)</i>								
SUBTOTAL DIRECT COSTS FOR INITIAL BUDGET PERIOD							\$	
CONSORTIUM/CONTRACTUAL COSTS		DIRECT COSTS						
		FACILITIES AND ADMINISTRATION COSTS						
TOTAL DIRECT COSTS FOR INITIAL BUDGET PERIOD <i>(Item 7a, Face Page)</i>							\$	
SBIR/STTR Only: FIXED FEE REQUESTED								
PHS 398 (Rev. 05/01) Page _____								

Number pages consecutively at the bottom throughout the application. Do not use suffixes such as 3a, 3b.